24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Sc	hedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48		
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
W	/omen Vote!		C C00473918		
Che	eck if 24-hour report X 48-hour report X New I	report Amends repo	ort filed on		
	Full Name of Payee TargetSmart		Date of Public Distribution/Dissemination		
			10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 1155 15th St NW		Amount		
	Ste 1000				
	City State Washington DC	Zip Code 20005-2728	3288.18 Transaction ID : VN7A7A5AR95		
ŀ	Purpose of Expenditure	1	Date of Disbursement or Obligation		
	Mailhouse	Category/ Type 001	10 06 7 2016		
ľ	Name of Federal Candidate	Support	Office Sought: House District: 00		
	Heck, Joe, , ,	x Oppose	President Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought	2029771.90	Disbursement For: Primary General 2016		
	Full Name of Payee	,	Other (specify)		
	The Pivot Group, Inc.		Date of Public Distribution/Dissemination		
	Mailing Address 1720 I St NW		10 18 2016		
	Ste 550		Amount		
ľ	City State	Zip Code	80511.96		
	Washington DC	20006-3741	Transaction ID : VN7A7A5AR87 Date of Disbursement or Obligation		
	Purpose of Expenditure Mailhouse	Category/ Type 004	10 06 2016		
ľ	Name of Federal Candidate	Support	Office Sought: House District: 00		
	Heck, Joe, , ,	x Oppose	President Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought	2029771.90	Disbursement For: ☐ Primary X General 2016 Other (specify) ▶		
((a) SUBTOTAL of Itemized Independent Expenditures		83800.14		
((b) SUBTOTAL of Unitemized Independent Expenditures				
	,		7 7		
((c) TOTAL Independent Expenditures		· •		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or conc with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a politic party committee) any political party committee or its agent.					
	Fines, Caroline, , , [Elect	tronically Filed] Date	10 18 2016		
	Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)						
Women Vote!	C C00473918					
Check if 24-hour report 48-hour report New report Amends report filed on M / D D / Y Y Y Y Y						
Full Name of Payee The Strategy Group, Inc		Date of Public Distribution/Dissemination				
Mailing Address 703 N Franklin		10 18 2016				
Suite 404		Amount				
	Zip Code	76043.57				
Chicago IL	60654-7205	Transaction ID : VN7A7A5ARA3 Date of Disbursement or Obligation				
Purpose of Expenditure Mailhouse	Category/ Type 004	10 / 13 / 2016				
Name of Federal Candidate	Support Of	fice Sought: House District: 00				
Ayotte, Kelly, , ,	X Oppose	President State: NH State:				
Calendar Year-To-Date Per Election for Office Sought	353017.57 Dis	sbursement For: Primary General Other (specify) Other				
Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination				
Waterfront Strategies		10 18 2016				
Mailing Address 3050 K St NW		Amount				
Ste 100						
City State Washington DC	Zip Code 20007-5161	219998.01 Transaction ID : VN7A7A5FYV1				
Purpose of Expenditure Media Buy TV	Category/ Type 004	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate	Support Of	fice Sought: House District: 10				
Comstock, Barbara, , ,	X Oppose	President Senate State: VA				
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General Other (specify) ☐ Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	······································					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	cally Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature						

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Women Vote!	C C00473918				
Check if 24-hour report					
Full Name of Payee	Date of Public Distribution/Dissemination				
Murphy Vogel Askew Reilly LLC	10 18 2016				
Mailing Address 1199 N Fairfax St	Amount				
City State Zip Code	8000.00				
Alexandria VA 22314-1483	Transaction ID : VN7A7A5JZH9 Date of Disbursement or Obligation				
Purpose of Expenditure Media Production Category/ Type 004	10 18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Off	ice Sought:				
Comstock, Barbara, , ,	President Senate State: VA				
Calendar Year-To-Date Per Election for Office Sought Dis 227998.01	sbursement For: Primary General Other (specify) General				
Full Name of Payee	Date of Public Distribution/Dissemination				
Mailing Address	Amount				
City State Zip Code					
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation				
Name of Federal Candidate Support Of	fice Sought: House District:				
Oppose	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	8000.00				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	387841.72				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fines, Caroline, , , [Electronically Filed] Date	10 18 2016				